PERSPECTIVES

A publication of the Mass. Department of Mental Health Office of Communications & Consumer Affairs

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Statewide DMH Citizens' Breakfasts connect legislators with local mental health communities

By Steve Holochuck
Director of Consumer Affairs

Promoting the vision of Recovery Through Partnership, the Department of Mental Health (DMH) hosted a series of six citizens' breakfasts this spring, connecting the six DMH Area mental health communities with local legislative delegations. From Boston to Springfield, consumers, family members, providers, board members, advocates, DMH staff, and legislators came together to hear the inspiring recovery and success stories of DMH consumers.

Commissioner Barbara A. Leadholm, M.S., M.B.A., outlined her vision for a transformed mental health system, speaking to hundreds of stakeholders during the breakfast series.

"Recovery and Resiliency through Partnership is our guiding principle as we continue to build a mental health system that is responsive to and inclusive of consumers," said Commissioner Leadholm. "We are all partners in the Department's work to increase awareness of our respect for consumers and families, and commit to our strength-based approach to care, recovery and resiliency."

Commissioner Leadholm described how the Department will move forward in its support of

the Governor's priorities of housing, education and employment. Access to treatment and delivering cost-effective, high quality services help DMH clients maintain housing, achieve educational goals and obtain employment so that they can participate in society to the greatest extent possible as productive citizens.

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Welcome to PERSPECTIVES



I am very pleased to present the first issue of **PERSPECTIVES**, a Department of Mental Health consumer publication. We hope that you find the information useful and informative. Communication with all stakeholders in the mental health community is vital to the mission of the Department of Mental Health. And the voices of consumers are integral to our mission of recovery. As our publications grow, I welcome and encourage contributions from all.

Enjoy!

Barbara A. Leadholm, M.S., M.B.A.

Commissioner

Recovery and Resiliency Through Partnership

Recovery Learning Communities becoming new local hubs for consumer activities

It began in April 2003 with the President's New Freedom Commission on Mental Health. The Commission's final report, "Achieving the Promise: Transforming Mental Health Care In America" contained the recommendation that the development of mental health systems be both consumer and family centered as well as recovery-oriented.

According to the Commission, successful transformation rests upon the following two principles:

- "First, services and treatments must be consumer and family centered, geared to give consumers real and meaningful choices about treatment options and providers not oriented to the requirements of bureaucracies."
- "Second, care must focus on increasing consumers' ability to successfully cope with life's challenges, on facilitating recovery, and on building resilience, not just on managing symptoms."

In 2005, the Department of Mental Health embraced the New Freedom Commission's vision of transformation and developed a plan to establish local consumer governed and staffed centers that would build upon established partnerships with consumers. Called Recovery Learning Communities, or RLCs, these local hubs

of information and support are now operating in all six DMH Areas. It's a new type of model, one that relies on the momentum of the consumer movement and the strong partnership among consumer leaders and DMH that continues to grow.



What is a Recovery Learning Community?

RLCs are consumer-run networks of self help/ peer support, information and referral, advocacy and training activities. Training in recovery concepts and tools, advocacy forums and social and recreational events are all part of what goes on in a Recovery Learning Community.

Although RLCs have both office and meeting space, a RLC is not program centered. It supports activities that occur in the locations in which people receive services and the community at large.

Everything going on in a Recovery Learning Community is of, by and for consumers.



A complete list of RLCs and contact information can be found on the next page.

What Does a Recovery Learning Community Do?

Recovery Learning Communities work to help people in a variety of ways. First and foremost, they create significant culture change that shifts the focus on symptom management to a focus on promoting recovery, resilience and wellness. RLCs also support consumers to take charge of their own recovery process. This is done by providing information and referral,

access to a variety of peer support and self-help activities, advocacy and training. Through such opportunities consumers are supported to assume an active role in managing their illnesses and move more quickly toward recovery. Participants are encouraged to develop a community around them that offers natural supports.

There is an emerging base of evidence showing that peer services and Peer Specialists speed a person's recovery and increase the amount of time that consumers stay out of hospitals. Efforts are underway to expand the number of Peer Specialists working in mental health programs. This change will require a training and testing process to certify Peer Specialists. Recovery Learning Centers will provide continuing education and support for Peer Specialists. RLCs will train and support providers and their agencies to be effective employers of Peer Specialists.

Who can use an RLC?

The doors are open to all individuals with a serious mental illness, regardless of insurance status.

RLCs work collaboratively with mental health providers, other human service agencies, and the community at large to forward the mission



of community integration and respect for people with mental health conditions. RLC activities are designed to appeal to the range of people in the community, including people of all racial and ethnic backgrounds and people of all co-occurring disabilities. RLCs are for everyone.

If you are interested in getting involved as a participant or volunteer, please contact the RLC in your Area. Employment opportunities are available in some RLCs.

Photos courtesy of Central Mass RLC.

Recovery Learning Communities

Central Mass. RLC 91 Stafford Street Worcester, MA 01603 (508) 751-9600 fax (508) 751-9601 centralmassrlc@yahoo.com

Metro Boston RLC c/o Boston Resource Center Solomon Carter Fuller Center 85 E. Newton Street, 5th Floor Boston, MA 02118 (617) 305-9974 info@bostonresourcecenter.org North East RLC c/o Nan Donald Northeast Independent Living Program 20 Ballard Road Lawrence, MA 01843 voice/tty 978-687-4288 fax 978-689-4488 ndonald@nilp.org

Metro Suburban RLC 460 Quincy Ave. Quincy, MA 02169 (617) 472-3237 fax (617) 786-7513 info@metrosubrlc.org Western Mass. RLC 187 High Street, Suite 303 Holyoke, MA 01040 toll free (866) 641-2853 voice/tty (413) 539-5941 fax (413) 536-5466 info@westernmassrlc.org www.westernmassrlc.org

Southeastern RLC 71 Main Street, Suite 100 Taunton, MA 02780 508-880-8527 ecampbell@comcounselling.org

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At each breakfast, local legislators expressed their support and enthusiasm for quality mental health services, citing the benefits to their constituents. Legislators also emphasized the importance of consumers and family members getting to know them and their staff by sharing stories of how services have a personal impact on their lives.

As consumers, we are the experts, we live with the illness, we can help others and give others hope.

~ Becky Cehura, Peer Specialist

Another highlight of the breakfast series were consumer and family speakers who shared their journeys of recovery and resiliency. Some DMH Areas also presented innovative programs. This all powerfully communicated the "Recovery is Real!" message.

At the Western Massachusetts Area Citizens' Legislative Breakfast in Springfield, Becky Cehura shared her recovery story. She told attendees that she is a person with a diagnosis of schizophrenia for which she takes medication. She described her experience of an acute episode of schizophrenia as "not knowing the difference of what is real and what isn't." Cehura talked about the negative images of people with mental illness as a real problem, especially the perception that consumers are violent. "We are NOT!" she resounded. "We are everyday people!"

DMH Information & Referral Line

1-800-221-0053

Toll-free in Massachusetts Mon. - Fri. 9 a.m. to 5 p.m. Cehura said that although medication is not a cure, it has been an important part of helping her to recover. She has also been helped by therapy and by getting and keeping a job. She works part time at Trader Joe's and has recently been hired as a Peer Specialist at ServiceNet, a Western Mass. Area provider. She also serves as co-vice president of the DMH Western Massachusetts Area Board.

As a peer specialist, Cehura hopes to meet consumers where they are in life and help them develop goals toward which to work. She wants "to share my successful stories." She enthusiastically stated that "as consumers, we are the experts, we live with the illness, we can help others and give others hope."

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We welcome contributions of articles and photos for PERSPECTIVES.

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